



RECEIPT # Record
UNITED STATES GENERAL ACCOUNTING OFFICE
WASHINGTON, D.C. 20548

Executive Registry

86- 1129X

GENERAL GOVERNMENT
DIVISION

March 14, 1986

HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES

SUBJECT: Short Form Claims Collection Litigation Report

Effective March 1, 1983, the General Accounting Office officially implemented the Claims Collection Litigation Report. This standard report was developed by the Department of Justice, with the support and cooperation of the General Accounting Office, for use in the referral of debt claims to the Department of Justice for litigation and enforced collection. The report format, with detailed instructions for its preparation as well as preparation of the accompanying referral package, was provided to Heads of Executive Departments and Agencies under memorandum dated January 20, 1983.

The Department of Justice has developed the enclosed Short Form Claims Collection Litigation Report for use by agencies in referring claims of \$5,000 or less, including interest, administrative costs and penalties. The Short Form and accompanying referral package should be prepared using those instructions included in the January 20, 1983, memorandum. All supporting documentation, as required in the memorandum, must also be provided.

If properly prepared, the Short Form Claims Collection Litigation Report should provide the Department of Justice with adequate information to handle the majority of uncontested debt claims referred by agencies. Any additional information or documentation needed by the Department of Justice to support a given claim is to be provided by the agency as set forth in the "Agency Certification" contained on the Short Form. Use of the Short Form will also enable agencies to produce referral packages in a more cost-effective manner and to refer their claims in a more timely manner.

The Federal Claims Collection Standards (FCCS) require agencies to refer claims to the Department of Justice using the CCLR, unless an exception is granted. 4 C.F.R. § 105.2. When the FCCS are revised, use of the Short Form will be specifically addressed. Until that time, however, this notice will serve as a blanket exception by the General Accounting Office and the Department of Justice to the FCCS requirement. Therefore, the Short Form may be used in accordance with this notice under the existing FCCS requirements.

W.J. Anderson

William J. Anderson
Director

Enclosure

SHORT FORM CLAIMS COLLECTION LITIGATION REPORT
 (Only for Use When Referring Claims of \$5,000 or Less, Including
 Interest, Administrative Costs and Penalties)

Date: _____

To: United States Attorney

Fm: _____

Attention Claims Collection Unit

Re:

(Debtor's Full Name (maiden name also))

(Debtor's Mailing Address)

Agency File/Claim No.:

\$ _____ is the total principal due.
 \$ _____ is the total interest due thru
 [month/day/year].
 \$ _____ is the total administrative
 charges due.
 \$ _____ is the total penalty charges
 due.
 \$ _____ is the total amount due.
 % _____ is the annual interest rate.
 _____ is the interest start date.
 _____ is the SOL date.

This claim is referred to you for suit and such other action as you deem appropriate to enforce collection. The prior action taken by this agency and the information provided you complies fully with Federal Claims Collection Standards (4 CFR Parts 101-105). The documentation required by 4 CFR Parts 101-105 is attached and the information you have requested follows.

THE DEBTOR

1. Date of Birth:	2. Social Security Number:
_____	_____
3. Also known as:	4. Name used on note/application:
_____	_____
5. Present <u>residence</u> (street address only; NO P.O. Box No.):	6. Residence/phone no. verified by (name, method and date):
_____	_____
7. Present phone number:	_____

THE CLAIM

8. Basis of claim or cause of action (and debtor's dispute, if any):	_____
_____	_____
9. Basis for SOL date:	_____
_____	_____
10. Last demand for payment (date, by whom and method of demand):	_____
_____	_____
11. Others legally responsible for debt (name, residence address, SSN, date of birth) and basis of liability:	_____
_____	_____

DEBTOR'S EMPLOYMENT

12. Present employer (including address/phone no.):

13. Employment verified by (name, method, and date):

14. Debtor's salary (indicate whether gross/net, weekly/monthly, etc.):
 \$ _____

15. Salary verified by (name, method, date):

16. Spouse's employer (including address/phone no., if known):

17. Spouse's employment verified by/when:

DEBTOR'S ABILITY TO PAY

18. The current credit report or financial statement attached and the following information or other information found in the attached file discloses the present or likely future availability of assets or income from which a substantial sum may be obtained by enforced collection proceedings:

19. The debtor owns or is buying the following real or personal property:

20. The following information will assist you in locating other assets of the debtor (name and branch of bank, savings/checking account no., etc.):

Agency Employee Responsible for Handling of the Claim: Name: _____
 Mailing Address: _____
 FTS Telephone No.: _____

If applicable, name of contractor used by agency to complete this CCLR: _____

AGENCY CERTIFICATION

This is to certify that this short form CCLR and accompanying referral package has been prepared in accordance with instructions set forth in the CCLR package which was officially implemented by the U.S. General Accounting Office on January 20, 1983. All supporting documentation, as required in the CCLR package, is attached.

It is fully understood that should any additional information or documentation be needed to support this claim, it will be provided not later than 12 working days after the United States Attorney's request, or by the date specified by the United States Attorney.

Upon this certification all action by the agency or any of its agents to collect this claim shall cease, pending further instruction from the United States Attorney.

(Signature of Agency Official)